## DECLARATION FOR UNITED STATES PATENT APPLICATION POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled IMPLANTABLE SURFACE ACOUSTIC WAVE DEVICES FOR LONG TERM CLINICAL MONITORING, the specification of which

				, including the clain
tability a	nowledge the duty to disclose to the P s defined in Title 37, Code of Federal		all information known to me	to be material to
than the	United States of America, listed below of any PCT international application has	v and have also identified be aving a filing date before the	elow any foreign application : at of the application on which	for patent or invent priority is claimed
	Prior Foreign	Country	Foreign Filing Date	Priority Claimed
		Country Great Britain	Foreign Filing Date December 15, 2003	Priority Claimed Yes

I HEREBY CLAIM the benefit under Title 35, United States Code, §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Patent	PCT Patent	Patent	Parent
Application Number	Application Number	Filing Date	Patent Number

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## DECLARATION FOR UNITED STATES PATENT APPLICATION POWER OF ATTORNEY, DESIGNATION OF CORRESPONDENCE ADDRESS

I hereby appoint the registered attorneys and agents of VENABLE associated with the following customer number to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

\*26694\* 26694

PATENT TRADEMARK OFFICE

VENABLE is located at 575 7th Street, NW, Washington, DC 20004-1601, Telephone: (202) 344-4000, Telefax: (202) 344-8300. Address all correspondence to VENABLE, Post Office Box 34385, Washington, D.C. 20043-9998.

The undersigned hereby authorizes the registered U.S. attorneys and agents identified herein to accept and follow instructions from the undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the registered U.S. attorneys and agents identified herein will be so notified by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature:	Date: 26.04,	, 2007
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